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APPLICANTS
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**** FOREIGN APPLICATIONS *******

**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ****
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Foreign Priority claimed 35 USC 119(a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No /ALVIN J STEWART/ Examiner's Signature	<input type="checkbox"/> Met after Allowance AS Initials	STATE OR COUNTRY IL	SHEETS DRAWINGS 9	TOTAL CLAIMS 38	INDEPENDENT CLAIMS 4
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 FOLEY & LARDNER LLP
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 UNITED STATES

TITLE
 Modular cannulated total joint prosthesis

FILING FEE RECEIVED 791	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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